DATENT	APPLICATION	FEE DE	TERMINAT	ION	RECORD
PAICNI	AFFLICATION		. 1 [[[] [] []]]	-	ILLOUID

App	lication	or	Docket	Number	

/			. ¬
100	81	X	X-1

		Effect	ive Octob	er 1, 20	001				100	81	1 X X-7)
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY							1					
TOTAL CLAIMS 2		42					RATE	FEE		RATE	FEE	
FOR NUMBER FIL		FILED	NUMBI	ER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00		
ТО	TAL CHARGEA	BLE CLAIMS	42 mir	nus 20=	* 2	2		X\$ 9=		OR	X\$18=	396.61
IND	EPENDENT CL	AIMS	, m	inus 3 =	* 0	2		X42=		OR	X84=	16 Q - 00
MU	ULTIPLE DEPENDENT CLAIM PRESENT											
* If	the difference	in column 1 is	less than ze	ero, ente	r "0" in c	olumn 2		TOTAL		OR	TOTAL	12.04-
	CI	LAIMS AS A	MENDE			(Calumn 2)		SMALL	ENTITY	OR	OTHER SMALL	THAN
_	,	(Column 1) CLAIMS		(Colu		(Column 3)	1 1	OMALL.	ADDI-) 		ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
4ME	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		֡֡֡֞֡֡֡֡֡֡֡֡֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֡֡֡֡֡֡֡֡֡֡֡	+140=		OR	+280=	
								TOTAL		ł	TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	ļ
		(Column 1)			mn 2)	(Column 3)	ι,					•
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME!	Independent	*	Minus	***		<u> </u> =	ļ	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NU PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
₩Q	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
MEN	Independent	*	Minus	***		=-		X42=		OR	V04	
[FIRST PRESE	NTATION OF M	MULTIPLE DE	PENDEN	IT CLAIM		_			104		
					HOP '-	alicene O		+140=		OR		
**	If the entry in colu If the "Highest Nu *If the "Highest Nu The "Highest Nur	mber Previously F	Paid For" IN Th Paid For" IN TI	HIS SPACE HIS SPACE	is less that is less th	an 20, enter "20 an 3, enter "3."	•	TOTAL ADDIT. FEE ound in the ap		OR	ADDIT. FEE	<u></u>